

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) 1820 PAC			FEC IDENTIFICATION NUMBER ▼ C C00698126		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee SRCP MEDIA, INC.			Date of Public Distribution/Dissemination 09 / 17 / 2019		
Mailing Address 201 N UNION STREET SUITE 200			Amount 276780.00		
City ALEXANDRIA		State VA	Zip Code 22314		Transaction ID : SE.4159
Purpose of Expenditure MEDIA PLACEMENT		Category/Type 004		Date of Disbursement or Obligation 09 / 10 / 2019	
Name of Federal Candidate COLLINS, SUSAN M., ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 276780.00			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee			Date of Public Distribution/Dissemination		
Mailing Address			Amount		
City		State	Zip Code		Date of Disbursement or Obligation
Purpose of Expenditure		Category/Type			
Name of Federal Candidate			<input type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 276780.00					
(b) SUBTOTAL of Unitemized Independent Expenditures ▶ 					
(c) TOTAL Independent Expenditures..... ▶ 276780.00					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>DATWYLER, THOMAS, ,</u>			[Electronically Filed]		Date 09 / 16 / 2019